User Guide for Practice Managers

Designed to assist practice managers to implement the Healthcare Identifiers (HI) Service.

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The Australian Association of Practice Managers (AAPM) is the national peak body representing Practice Managers and the profession of Practice Management. Founded in 1979, AAPM promotes professional development and ethics through leadership and education and provides specialised services and networks to support quality Practice Management. AAPM has a National Board of Directors consisting of elected representatives made up from AAPM's state branches. The board's function is to manage the overall direction of AAPM including areas such as membership and accreditation, education, marketing, publications and regulations. State Branches conduct education programs, including courses, seminars and workshops. Australian Association of Practice Managers Limited (AAPM) Level 1, 60 Lothian St, North Melbourne VIC 3051 www.aapm.org.au T 1800 196 000 E headoffice@aapm.org.au ©AAPM 2012

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Purpose of the HI Service

Associating the wrong health information with a healthcare recipient can jeopardise clinical safety.

The purpose of the HI Service is to assign a unique national healthcare identifier for each patient, practitioner and healthcare organisation, to establish and maintain accurate records to support the communication and management of health information.

Why do I need to use the HI Service?

The HI Service is the fundamental building block for secure electronic communication of health information between practitioners and the creation of a personally controlled electronic health record. The HI Service allows health providers to associate health information about an individual in a secure, consistent and accurate manner (i.e. health providers will know they are talking about the same patient, and know where the communication has come from and is going to). In the near future, identifiers will be used within electronic communications such as discharge summaries, prescriptions and referrals to correctly identify the patient, referrer, referring organisation, referee and referee organisation.

Types of Healthcare Identifiers

The HI Service operated by Department of Human Services (DHS) allocates a unique 16 digit healthcare identifier number to patients, practitioners and healthcare organisations. The HI Service will give patients and practitioners confidence that the right health information is associated with the right patient at the point of care. There are four types of healthcare identifiers:

- Individual Healthcare Identifier (**IHI**): allocated to all individuals enrolled in the Medicare program or those who are issued with a Department of Veterans' Affairs (DVA) treatment card and others who seek healthcare in Australia.
- Healthcare Provider Identifier – Individual (**HPI-I**): allocated to healthcare providers involved in providing patient care.
- Healthcare Provider Identifier – Organisation (**HPI-O**): allocated to organisations (such as a hospital or medical clinic) where healthcare is provided.

  There are two types of HPI-Os:

- A **Seed HPI-O** is any legal entity that delivers healthcare services within Australia , e.g. medical practices, community healthcare or hospitals.
- A **Network HPI-O** is a sub-entity of a Seed HPI-O that provides healthcare services. For example, practices with multiple locations or hospital departments (such as a maternity ward, emergency department).
- Contracted Service Provider (CSP): is an organisation (most likely a software vendor) that acts on behalf of a healthcare provider organisation supporting the secure delivery and management of health information.

  A CSP can obtain healthcare identifiers from the HI Service, and use or disclose healthcare identifiers. A CSP must apply to the HI Service for a registration number and cannot interact with the HI Service until a practice or other type of healthcare organisation has authorised it to do so. While this registration number appears similar to healthcare identifiers it is simply a registration number.

Administering the HI Service in your Practice

Two types of roles have been developed for the HI Service for administrative purposes:

- A **Responsible Officer (RO)** is the officer of a healthcare organisation who has accepted responsibility for participation of their organisation in the HI Service. The RO is primarily responsible for ensuring their organisation, its network organisations (if any) and any authorised employees comply with the *Healthcare Identifiers Act 2010* and supporting Healthcare Identifiers Regulations. An RO has authority for creating and dissolving seed HPI-O's and for appointing, at least one **Organisational Maintenance Officer (OMO)** attached to the seed organisation.
- An **OMO** is an officer of a healthcare organisation that is responsible for maintaining information about their organisation within the HI Service. They act as an authorised representative of the healthcare organisation and maintain the accuracy and completeness of the HPI-O record, add new OMOs, maintain links with HPI-I records, create network organisations and manage the organisation hierarchy.

Roles of a RO and an OMO

Role	Responsible Officer (RO)	Organisation Maintenance Officer (OMO)
Create and deactivate a Seed HPI-O within the HI Service	✓	✗
Nominate an OMO	✓	✓ (for the organisation(s) they represent or are below them in the organisation hierarchy)
Request the HI Service Operator to process a Change of Ownership for a Seed Organisation	✓	✗
Add or remove links between an RO or OMO at the Seed level	✓	✗
Add or remove links for OMOs or linked healthcare providers	✗	✓ (for the organisation(s) they represent or are below them in the organisation hierarchy)
Update their own demographic details	✓	May only request to amend their own details or details about the organisation they represent. Cannot change them directly.
Amend information in the Healthcare Provider Directory	✗	✓ (for the organisation(s) they represent)
Administrative access to the organisation records in the HI Service	✗	✓ (for the organisation(s) they represent or are below them in the organisation hierarchy)

Healthcare Provider Directory

The Healthcare Provider Directory (HPD) is a consent based (opt-in) listing of healthcare organisations and providers registered with the HI Service.

It can include contact and location details, as well as provider type and speciality. Once healthcare providers have registered with the HI Service, they can choose to be listed in the HPD and nominate which information to publish.

Healthcare providers can use the HPD to look up the details of healthcare organisations and providers participating in the HI Service, by either using a HPI-I or HPI-O number or demographic details. Healthcare organisations can link healthcare provider's details to their organisation details in the HPD, with the consent of the healthcare provider.

AAPM encourages practice managers to take the opportunity to opt-in for the HPD once they have registered for the HI Service and become an RO or OMO.

Registration

Healthcare organisations and professionals can register to use the HI Service through the DHS. An HPI-O and an HPI-I are both required to access the HI Service.

Registering for an HPI-I

Practitioners already registered with Australian Health Practitioner Regulation Agency (AHPRA) have been automatically assigned with a HPI-I and will need to log in to the AHPRA website to obtain their HPI-I. Practitioners whose field of practice is not covered by AHPRA may apply to the HI Service for a HPI-I if they are eligible under the *Healthcare Identifiers Act 2010*.

Registering for an HPI-O

To be registered as a **Seed HPI-O**, there must be one:

- or more healthcare providers who provide healthcare services as part of their duties;
- RO
- OMO

There is no limit to the number of **Network HPI-O's** that may exist under a Seed HPI-O and an OMO may be appointed for each network HPI-O within the hierarchy.

A healthcare organisation will receive a HPI-O when they register to participate in the HI Service with DHS. Forms to register a healthcare organisation are stored on the DHS website, or you can follow the links below:

- Application to register a Seed Organisation
- Application to register a Network Organisation

Individual Healthcare Identifier (IHI) Service

IHI Record Status

There are three types of record status of an IHI:

- **Verified IHI** – allocated to an individual that is a known customer of DHS, DVA or Department of Defence, or has provided evidence of identity information that has been recorded in the HI Service by the HI Service Operator to establish the identity of the healthcare individual.
- **Unverified IHI** –created and allocated to an individual at a healthcare facility when the individual has not provided evidence of identity to DHS. An Unverified IHI can be merged with another Unverified or Verified IHI record. Unverified IHIs are generally reserved for non DHS eligible individuals (overseas visitors/diplomats, newborns not yet registered with DHS) or individuals who are seeking healthcare and would like to remain anonymous.
- **Provisional IHI** – created and allocated to an individual at a healthcare facility if they are unconscious or incapacitated and unknown to the healthcare facility. Provisional IHIs are able to be updated to an Unverified IHI record or merged with an existing (Unverified or Verified) IHI via a healthcare facility or updated to a Verified IHI via the HI Service Operator by providing evidence of identity. Provisional IHIs will expire 90 days after the last date of use.

IHI Number Status

In addition to record status an IHI will have a number status. The following information provides an outline of the different types of status for an IHI number:

- **Active** – an IHI is active when it does not have a date of death on the record, the age is not greater than 130 years and it is not expired.
- **Deceased** – an IHI is deceased when there is a date of death present on the record but it has not yet been matched with Fact of Death Data (FoDD) from Births, Deaths and Marriages Registries and age is not greater than 130 years.
- **Retired** – an IHI is retired when there is a date of death present on the record and either it has been matched with FoDD or has reached an age of 130 years (verified IHI records only).
- **Expired** – an IHI is expired where it is provisional and there has been no activity on the record for 90 days, or where it is unverified and has reached an age of 130 years.
- **Resolved** – an IHI is resolved when it has been linked with another record as part of resolving a provisional record or resolving a duplicate record, or end dated as part of the replica resolution process.

It is recommended that practices develop policies and procedures regarding the creation and use of Verified, Unverified and Provisional IHIs.

Searching for an IHI

The types of searches for IHI in the HI Service shall be restricted to four search types, to ensure the matching of the correct IHI to an individual, thereby avoiding clinical risk of misidentification.

This searching criteria has been determined and approved following extensive testing for clinical safety purposes. Software vendors are required to undergo conformance assessment, which incorporates the requirements for searching, before they are allowed to access the HI Service.

Any health software searching for an IHI in the HI Service using the business-to-business (B2B) channel shall use no other IHI search types. Note that this requirement does not apply to searches containing an IHI as a search parameter (e.g. searches to validate an IHI).

The search types are:

1. Medicare card search with Medicare card number, IRN, family name, given name, date of birth, and sex;
2. Medicare card search with Medicare card number, family name, given name, date of birth, and sex;
3. DVA file number search with DVA file number, family name, given name, date of birth, and sex; and
4. Detailed IHI search with family name, given name, date of birth, sex and address.

More than one search may be performed of each search type. For example search type (4) could be performed with one given name and if this fails the search type may be repeated with a second given name for that patient record.

If the health software automatically applies one search after another, then the search iteration shall not continue after a matching IHI has been found.

Health software will not support any other search types when searching for an IHI in the HI Service. If a match cannot be found the healthcare provider can contact the HI Service team.

The search types may be performed using historical data (e.g. using a person's maiden name for the family name) subject to the condition that historical data shall be used only if the IHI searches using current data fail to find a matching IHI.

Data Quality

Maintaining the data quality in your practice is recommended and forms part of an organisation's obligations under the *Privacy Act 1988*. A review should be undertaken on a regular basis to ensure patient information is up-to-date and accurate. This will aid the practice when searching and matching against information held by the HI Service.

Some common issues that can lead to mismatching of IHI records are:

- invalid Medicare card number;
- missing Medicare card number;
- invalid address; and/or
- invalid or missing DVA number.

Data quality will undoubtedly become part of the responsibility of the administration team where it relates to patient demographic information. It starts with making sure the information stored is accurate, up to date and complete and extends to making certain that patients are not registered in systems more than once.

Software Compliance

Software systems designed to use national Healthcare Identifiers are required to undergo a two-stage assessment process to demonstrate they comply with national specifications for quality, safety and interoperability.

Separate Notice of Connection (NOC) tests, required by DHS and independent Compliance, Conformance and Accreditation (CCA) tests have been streamlined into a single business process.

The NOC process checks that HI software clients do not pose any risk to DHS's operating environment, while the CCA requirements assess the behaviour of software applications or the manner in which they acquire, use and manage healthcare identifier information. Even if the software does not directly access the HI Service. The compliant software is essential to clinical safety.

Practice managers are encouraged to speak with the practice software providers to ensure that the practice management software complies with HI Service requirements.

HI Service Checklist for Practice Managers:

- ❑ Review current business practices to identify any key areas that will need to be addressed prior to the integration of the healthcare identifiers. e.g. Rejected IHI's, consent.
- ❑ Implement processes in your practice to ensure all of your current patient data is accurate and up-to-date. A simple way to do this is confirm patient details when they visit your practice.
- ❑ Speak with your software providers to ensure that your practice management software complies with HI Service requirements.
- ❑ If practitioners in your practice are not registered with AHPRA, register with DHS to obtain HPI-Is.
- ❑ Register, on behalf of your practice, for an HPI-O:
  - ❑ Determine who will be the RO and who will act as the OMO (if not the same person.)
  - ❑ Gather supporting identification documentation for RO, OMO and organisation.
  - ❑ Download and fill in form 2978 (Seed organisation)
  - ❑ If required, download and fill in form 2849 (Network organisation)
  - ❑ Check all forms and supporting documents are signed by a referee.
  - ❑ Fax or post application to DHS.
- ❑ Develop a local policy for the use of Verified, Unverified and Provisional IHIs.
- ❑ With consent from the organisation and practitioner, contribute information to the HPD.
- ❑ Request through DHS to have permissions on PKI certificates updated to include access to the HI Service.
- ❑ Take advantage of any education and training opportunities available to practice managers in the future relating to the HI Service.

Acronyms

AAPM	Australian Association of Practice Managers
AHPRA	Australian Health Practitioner Regulation Agency
B2B	Business-to-business
CCA	Compliance, Conformance and Accreditation
CSP	Contracted Service Provider
DHS	Department of Human Services
DVA	Department of Veterans' Affairs
FoDD	Fact of Death Data
HI Service	Healthcare Identifiers Service
HPD	Healthcare Provider Directory
HPI-I	Healthcare Provider Identifier - Individual
HPI-O	Healthcare Provider Identifier - Organisation
IHI	Individual Healthcare Identifier
NEHTA	National e-Health Transition Authority
NOC	Notice of Connection
RO	Responsible Officer
OMO	Organisation Maintenance Officer

Information

Contact the DHS HI Service team:
Call: 1300 361 457
Email: healthcareidentifiers@medicareaustralia.gov.au

HI Service registration: http://www.medicareaustralia.gov.au/provider/health-identifier/index.jsp

eHealth: http://www.aapm.org.au/media/eHealth or www.ehealthinfo.gov.au

aapm
eHealth